

OBESITY PREVENTION PROGRAM

Arizona Department of Health Services

Community Workgroup Summary

July 1, 2004

Attendance – 22 People

Welcome by ADHS

The purpose of this second workgroup meeting was to build on previous work by adding strategies, identifying criteria, and selecting strategies by a dot selection process. We reviewed the program's vision, mission and goals as well as previously determined group scope of work, ground rules, plan elements and timelines (all of which can be found in May's workgroup summary).

We were hoping to announce the members of the Obesity Prevention Program Advisory Team, however were not able to do so. While we appreciate the volunteers who did come forward, we are in need of some more diversity in our group; therefore we are still looking for more volunteers to serve our program in this capacity. If you are interested, please contact your staff liaison. When we have a slate of candidates, we will need to present them to our Director, Cathy Eden, for approval.

The staff liaison identified some elements that are important to keep in mind as we move through the process of writing the comprehensive state plan including the Social Ecological Model, Social Marketing, Centers for Disease Control and Prevention criteria for the grant and the concept of a state plan vs. a state health department plan.

All workgroup participants received a handout from the Washington State plan that outlines the Social Ecological Model. The model includes five spheres of influence that in turn affect each other. They include individual, interpersonal, institutional/organizational, community and public policy. Interventions should be based on this model, which focuses on the behavior choices of each individual as well as situations/factors within each sphere that can influence that behavior. Rather than focusing on personal behavior change interventions with groups or individuals, public health problems must be approached at multiple levels, stressing interaction and integration of factors within and across levels. ***If you did not attend the workgroup, you can get the handout at the next meeting.***

We also wanted to introduce the idea of social marketing to the workgroups. Social marketing is the application of commercial marketing concepts to the planning and implementation of programs intended to influence the voluntary behavior change of a target audience. Social marketing planning can be used to address health issues at all levels of the social-ecological model. Rather than dictating the way that information is being conveyed from the "top down", public health is using social marketing to listen to the needs and desires of the target audiences themselves and building the programs from there.

All workgroup participants also received a handout on the criteria outlined by the Centers for Disease Control and Prevention for the grant. ***You can view this separately online along with the summaries.*** These are things we have to keep in mind while moving forward with the plan.

Lastly, we wanted to re-emphasize how important it is to have buy-in from workgroup participants and local grassroots leaders. A state plan requires some of the planning and work to come from the state agency, but the bulk of the work is at the local level. It is therefore essential that we have local stakeholders who support this endeavor beyond the workgroup meetings.

Identified strategies

The workgroups reviewed the strategies from the last meeting and then did some more strategizing based on the CDC criteria that were posted for consideration. At the end of the session, the group did a selection process to select the strategies they would like to have included in the plan.

There was no limit on the number of BLUE dots they could use, however each participant could use one dot per strategy if they liked it but not more than one dot per strategy. For round two, participants were give only two RED dots to vote for the two most important strategies.

The strategies are listed in order of number of votes.

Identified strategies

1. Market programs already in existence in communities dealing with active living and healthy lifestyles. **6 Red 13 Blue**
2. Educate communities on active living and healthy lifestyles through a media campaign. Make the message a family approach, community approach. Work with business leaders to educate and provide alternatives. Media campaign- clever, funny, a catchy phrase. Ask the television businesses for incentives, free airtime promoting physical activity and healthy lifestyles. Find a television station owner that is passionate about fitness. **6 Red 11 Blue**
3. Support P.E. “homework” in the home from schools. Open school facility to community (no school budget item, a community budget). **5 Red 13 Blue**
4. Create statewide fitness program (start with walking), that would be community-based and promoting lifetime activity. Utilize neighborhood watch program to promote. For example, meet for 7:00 a.m. walk, 2-3X/week. **3 Red 14 Blue**

5. Use a web site to advertise/list available programs. **3 Red 10 Blue**
6. Cooperation/partnership at the local, state, federal level to make the ideas work. **3 Red 6 Blue**
7. Involve/Educate grocery stores and restaurant owners. **2 Red 11 Blue**
8. Promote use of mass transit (people have to walk from light rail stop to home and work. **2 Red 8 Blue**
9. Develop partnerships in the community that address/plan for/incorporate sustainability. **2 Red 5 Blue**
10. Promote use of Community Gardens and encourage land donation/use throughout community. Prison System used to prep land. Training of master gardeners **1 Red 12 Blue**
11. Increase access to fruits and vegetables through grocery stores, farmers markets, schools, salad bars in schools, worksite, etc. (coupons, grocery stores, farmers markets). **1 Red 7 Blue**
12. State/Local Policy Practice paid time for P.A. **1 Red 7 Blue**
13. Require that all public places and worksites have some type of accommodations to promote/ provide support for breastfeeding. **0 Red 25 Blue**
14. Increase access to fruits and vegetables through WIC: by changing or developing policy - coupons currently good for milk, cheese, beans **0 Red 15 Blue**
15. Partner with ASU/East Healthy Lifestyles Centers for Data, Research, and Evaluation. **0 Red 15 Blue**
16. Work with local media to promote healthy living. All media – bill boards, radio, print, school media, business newsletters **0 Red 13 Blue**
17. Target fitness facilities to offer fee reduction for off-peak usage and better family rates to allow more activity time with family. **0 Red 12 Blue**
18. Incorporate physical activity opportunities into community events/fairs. Piggyback on organized community events and fairs to offer PA opportunities at all events. i.e. Greek Fair – have a PA event as participants family dance, hike. **0 Red 10 Blue**
19. Increase social awareness of the benefits of breast-feeding. Make breast feeding more socially acceptable, using a media campaign to educate. **0 Red 10 Blue**

20. Advertise 0 Red 7 Blue

1. Work through state “neighborhood watch” organizations to distribute info
 2. Local media to raise awareness (TV, radio, newspaper, billboards, buses)
 3. “Stop sign ads”
- Volunteer in group to help coordinate
 - Engineer or appeal to “belonging” to walking community
 - Churches in rural areas

21. Pull coalitions together to meet/share P.A. & Nutrition

22. Integrate education about portion control into the daycare population during snack time (parents) 0 Red 6 Blue

23. Incorporate teaching of healthy behaviors into mandated and voluntary community parenting classes. 0 Red 6 Blue

24. Market low cost/free family-oriented programs to increase Physical Activity 0 Red 6 Blue

25. Form a coalition to implement the Community Gardens. 0 Red 5 Blue
Include Seniors, Coop. Extension, Park & Rec., Police & Fire departments etc.
Make it a group effort utilizing groups such as prisons, graffiti abatement prog.

26. Facilitate children attending after school P.A. by providing transportation to and from city parks and recreational P.A. events. 0 Red 4 Blue

27. Incorporate 5-a-Day services into Faith-based programs. 0 Red 4 Blue

28. Increase the marketing of the 5-a-Day logo 0 Red 2 Blue

29. Proceeds from professional sports tickets sales to support Physical Activity programs. 0 Red 2 Blue

Parking Lot

Promote salad bars in schools

F/V snacks in schools (USDA or local funding)

Look at intermediate outcomes vs. decrease in obesity, change in attitude, behavioral outcome at this level

Data Needs across all workgroups

Community group to address Daycare, childcare
